

Zoning Dept. Use Only
 Approved _____
 Denied 6/18/18
 ZEO Initials AC

Zoning Permit Application

Town of Sheldon
 1380 Centerline Rd.
 Strykersville, NY 14145
 County Office – 585-786-3152
 ph(585) 535-7644 fax(585) 535-0216
 e-mail – sheldontownclerk@rochester.rr.com

Fee to be paid upon filling
 this application 170.00
 Date Paid 6/18/18
 Check _____ Cash

PAID

Instructions:

1. This application must be completely filled in by typewriter or ink and submitted in duplicate to the Wyoming County Zoning Department or Town Clerk.
2. A plot plan showing location of lot and of buildings on premises, relationship to adjoining premises or public streets or areas, and giving a detailed description of layout of property must be submitted with this application.
3. The work covered in this application shall not commence prior to issuance of a Building Permit.
4. Upon approval, the Zoning Officer shall issue a Zoning permit to the applicant. Such permit and specifications shall be kept on premises available for inspection throughout the work progress.
5. No building shall be occupied or used in whole or in part for any purpose, until a certificate of occupancy has been issued for such use by the Building Department.
6. Upon permit issuance, all work is to be completed within 12 months or a permit renewal must be obtained.

Application is hereby made to the Zoning Department for the issuance of a Zoning Permit pursuant to The Town Zoning Law and the New York State Uniform Fire Prevention and Building Code for the construction of buildings, additions, alterations, or for removal or demolition, as herein described. The applicant agrees to comply with all applicable laws, ordinances and regulations.

Project Location: 2588 School Street Tax Parcel# 69.02-2-21
 Applicant Name: Mark Herman ^{Lic to be} Applicant Address: 4584 Wilder Rd, Warsaw Ny
 State whether applicant is owner, lessee, agent architect, engineer or builder: _____
 Owners Name: Same As Above Owners Address: _____
 Phone# _____ Cell# 921-4587

1. Project Description: Conversion to Multiple unit housing + School
2. Is this project located within a flood plain? (check): Yes _____ No
3. Is this a change of use and or occupancy (check): Yes No _____
4. Nature of work (check): New Structure _____ Addition Alteration _____ Repair _____ Removal _____ Demo _____
 Pool _____ Solid Fuel _____ Other (give description) _____
5. Dimensions of new structure: Front _____ Rear _____ Depth _____ Height _____ Number of Stories _____
6. Dimensions of Addition: Front _____ Rear _____ Depth _____ Height _____ Number of Stories _____
7. If Alterations, state nature of work: Creation of Dormitory style housing units
8. Name of Contractor: To be Determined Phone# _____
9. Name of Design Professional: To be Determined Phone# _____
10. Zoning District in which the work will take place: R
11. Estimated cost of the project: \$100,000
12. On the plot diagram provided on page 2, or an attachment, provide location of the street or road, all buildings existing and proposed, dimensions from lot lines and streets or roads.

Applicants Signature: Mark Herman (S) He is the owner, agent or contractor of said owner or owners, and is duly authorized to perform or have performed the said work and to make and file this application; that all statements contained herein are true to the best of his or her knowledge and belief, and that the work will be performed in the manor set forth in the application and in the plans and specification filled herewith.
All Zoning Permit approvals must be taken to the Wyoming County Building Department to obtain a building permit prior to any work starting.

Plot Diagram



Street Name: _____

This Permit # _____ is hereby _____ Approved, Disapproved
Issued for: _____ with the following
stipulations: Needs special use permit

Zoning Enforcement Officer: Diana Cutcliffe

Date of approval: _____ (or) Date of denial: 6/18/18
Reason for denial (check): _____ Needs Area Variance, _____ Needs Use Variance,
 Needs Special Use Permit

<u>Special Use Permit</u>	
Date: _____	Fee: _____
Approved by: _____	

<u>Zoning Variance</u>	
Date: _____	Fee: _____
Approved by: _____	

Action Requested:

Town of Sheldon

- Special Use Permit
- Temporary Use Permit
- Home Occupation Permit (minor) (major)

Date Received:	<u>6/8/18</u>
Fee to be Paid:	<u>\$150.00</u>
Check:	Cash: <input checked="" type="checkbox"/>
GML-239 Referral:	<input checked="" type="checkbox"/>

Application is hereby submitted to the Planning Board for review:

Requesting:

Applicant is requesting a Permit for the property described herein for the following purpose(s):

To convert the existing school building to a dormitory style housing for rehab patients and a potential adult workforce education facility.

Reason(s) for the request:

The applicant alleges that the approval of said special use permit would be in harmony with the intent and purpose of said zoning ordinance (local law) and that the proposed use conforms to the standards prescribed therefore in said ordinance (local law) and would not be detrimental to property or persons in the neighborhood for the following reason(s):

It would already follow the current use for education. The dormitory style housing would be the only change to the use.

Special Features:

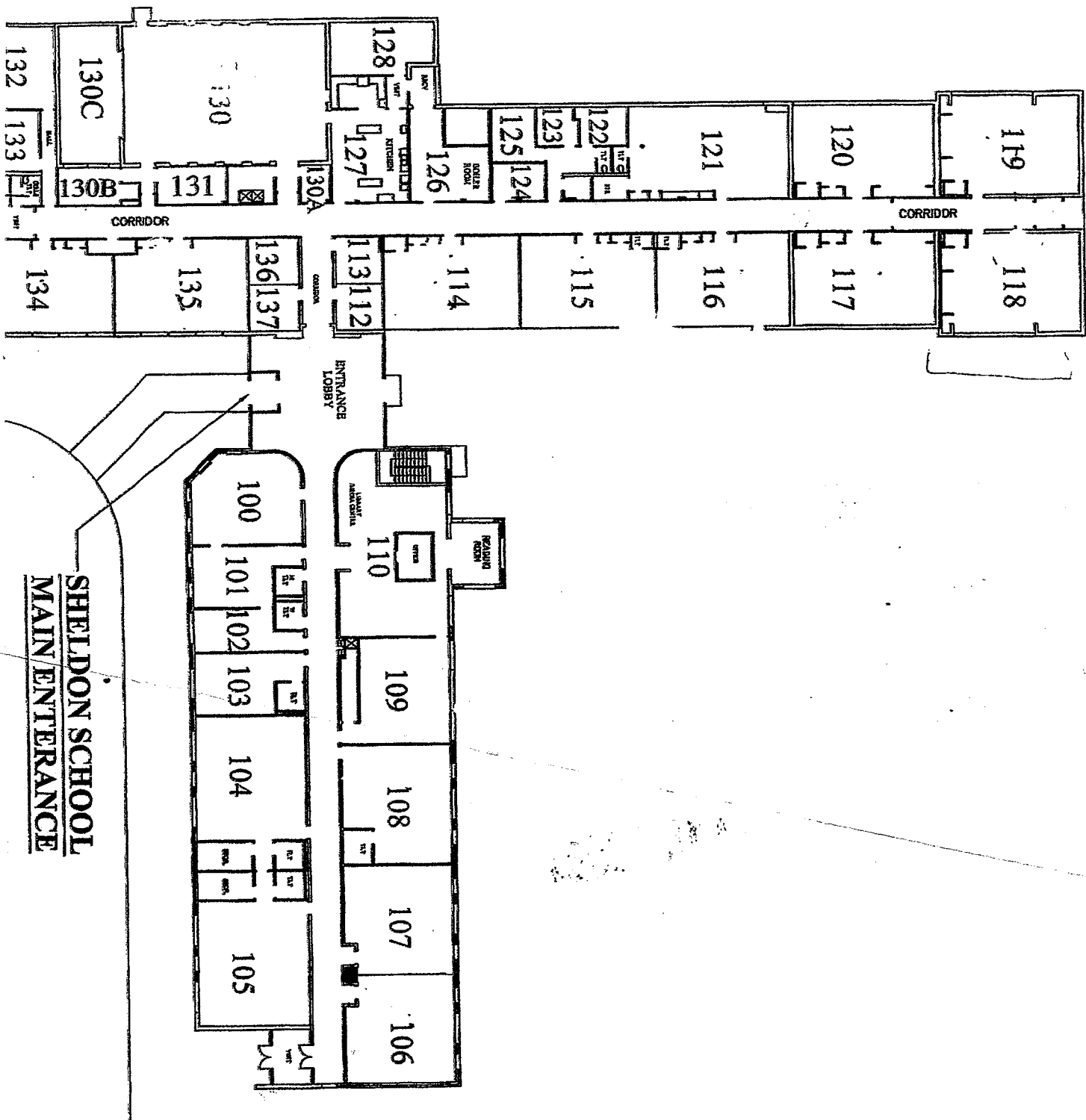
In addition to meeting the standards prescribed by the zoning ordinance (Local Law) the applicant will provide:

An adult workforce education program potentially open to the public. The applicant will also bring the building back to its former glory and put it back on the tax roll
in order that the public convenience and welfare will be further served.

Signature: Mark Herman Date: 6/8/18 Contact Ph#: 721-4587

Documents Submitted:

- A certified survey map of parcel indicating setbacks of building(s) on the property and proposed dimensional changes if any.
- Completed Environmental review form (SEQR) if required.
- Fee ~~of \$150~~ submitted with application.
- Complete description of proposed activity including; parking, hours of operation, physical changes to property:



SHELDON SCHOOL
MAIN/ENTRANCE

Short Environmental Assessment Form

Part 1 - Project Information

Instructions for Completing

Part 1 - Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 - Project and Sponsor Information			
Conversion of Sheldon School to rehabilitation center with short term residents & Adult workforce development day program			
Name of Action or Project: Sheldon School Project			
Project Location (describe, and attach a location map): Sheldon School-2588 School Street			
Brief Description of Proposed Action: The applicant proposes to convert the old school building to a facility for short term rehabilitation which will include 24 hour residency for short terms. The other side of the building will be used for a potential adult workforce development program (daytime only) wherein public and residents who have been released from the rehab program will be able to learn new skills and trades to further their careers or assist them in gaining meaningful employment. The project will include construction in the interior of the building. The outside of the building will remain virtually unchanged, except for potential signage. In the future, the applicant proposes to have a phase II to this project which would include new buildings for affordable housing and potential on site laundry.			
Name of Applicant or Sponsor: Mark Herman & LLC (Name to be determined)		Telephone: 585-721-4587	
		E-Mail: n/a	
Address: 4584 Wilder Road			
City/PO: Warsaw		State: NY	Zip Code: 14569
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.			NO <input type="checkbox"/>
			YES <input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval:			NO <input type="checkbox"/>
			YES <input checked="" type="checkbox"/>
3.a. Total acreage of the site of the proposed action?		5.44 + acres	
b. Total acreage to be physically disturbed?		0 (phase 1) acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		_____ acres	
4. Check all land uses that occur on, adjoining and near the proposed action.			
<input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Residential (suburban)			
<input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____			
<input type="checkbox"/> Parkland			

<p>18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)?</p> <p>If Yes, explain purpose and size: _____</p> <p>_____</p> <p>_____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility?</p> <p>If Yes, describe: _____</p> <p>_____</p> <p>_____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste?</p> <p>If Yes, describe: _____</p> <p>_____</p> <p>_____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</p> <p>Applicant/sponsor name: <u>Mark Hezeman</u> Date: <u>6/13/19</u></p> <p>Signature: <u>Mark Hezeman</u></p>		